Remarks

In the Official Action mailed 8 August 2006, the presently claimed embodiments of the invention were rejected as being unpatentable under 35 U.S.C. 112 and 35 U.S.C. 102(e).

5 Each of these rejections is addressed in turn below.

Rejections under 35 U.S.C. 112

Claims 1-7, 9, 10 and 12 were rejected under 35 U.S.C. 112, second paragraph, as being indefinite for failing to particularly point out and distinctly claim the subject matter which Applicant regards as the invention. Specifically, the term "medical data" was considered to be indefinite. The term "electronic clinical reference material" was likewise held to be indefinite.

It is noted that "medical data" is considered synonymous in the present application with "medical reference information." As such, the claims have been amended to make that change without narrowing their scope to any degree. The use of the term "electronic clinical reference material" in the claims was a clerical error and such references have been removed.

It is believed that the rejections based on 35 U.S.C. 112, second paragraph, have all been addressed.

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Rejections under 35 U.S.C. 102(e)

With respect to the rejections made under 35 U.S.C. 102(e), Applicant responds as follows:

It was stated that claims 1, 6 and 9 were rejected because Stefanescu discloses a method and system for creating a medical reference book on a desired topic in the Abstract.

The Stefanescu Abstract reads as follows:

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"The database organization and searching systems disclosed herein provide techniques for organizing large-scale image data sources such as medical image databases. Database records such as medical images may be pre-processed, such as through registration, segmentation, and extraction of feature vectors, to effectively normalize data among different images. Each image, or a portion thereof, is then labeled according to some observed characteristic or other attribute. A model, such as a linear regression model, may then be trained to associate the feature vectors with the labels. The model is then available for labeling other images. In this manner, search techniques for well-organized or indexed databases may be applied automatically to databases that are not well-organized, but that have the same underlying data type. Data that is organized in this way may also be used to construct diagnostic aids or other tools."

With all due respect, Applicant is unable to see anywhere in the Abstract that mentions application of the technology in the context of creating medical reference books. In fact, it appears to Applicant that Stefanescu relates only to a database and says nothing about

its application in publishing a current reference book. Whereas one of the novel features of the present invention is its application in creating up-to-date medical reference books.

With respect to the other elements of claims 1, 6 and 9, it is respectfully submitted that

these are likewise not taught in the Stefanescu reference. Specifically, nothing in

Stefanescu mentions an "electronic authoring tool including: i) a master outline authoring tool, whereby an author is able to create a linkage between a diagnosis, an anatomical region, and a pathology; ii) a case authoring tool, whereby the author is able to enter and edit images and text relating to a particular case; and iii) a diagnostic authoring tool, whereby the author is able to create a comprehensive description of the diagnosis."

While Stefanescu may mention a "view selection menu for specifying anatomical region, pathology, etc."; and a "matching button" for "matching a current image, e.g., an image accompanying the reference text, to other images and/or clinical data stored within the system" (Paragraph 56), it is respectfully submitted that Applicant's invention as presently claimed is not just for a general authoring tool, but rather an authoring tool in which the author is able to "create a linkage between a diagnosis, an anatomical region, and a pathology...." Nowhere in Stefanescu is there any discussion of how such linking might be accomplished. It certainly does not mention the XML-based linkage system that is discussed in Applicant's specification.

Given that this reference, at best, only makes passing mention of such features, it is respectfully submitted that the rejection is improper in that these elements of Applicant's invention are not "described in" the Stefanescu application as required under 35 U.S.C. 102(e).

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Moreover, one novel feature of the presently claimed invention is that the case authoring tool enables an author to take radiology images and write new, XML-tagged text data and to link all this data to a specific radiology diagnosis. Stefanescu does not even mention such ability.

- As for the rejection of claim 2, it is respectfully submitted that Stefanescu does not disclose reviewing the medical data before transferring it to the database. Applicant's present system enables it to have safeguards that prevent inaccurate data from being incorporated into the database. These safeguards are not even possible with the Stefanescu system.
- As for the rejection of claim 7, it is respectfully submitted that while Stefanescu might refer to a protocol relating to images, it is a significantly different system, used for a significantly different purpose. Specifically, Stefanescu describes a protocol for an image matching system. Whereas the protocol advisor in the present application is a system that helps radiologists and radiation therapy technicians select the correct settings on radiology imaging equipment.

As for the rejection of claim 8, Applicant can see no reference to continuing medical education in Fig. 4 or 16. The item 1634 is identified as where "the user's comments are matched up with database entries...." (Paragraph 126) The reference in the Office Action to "also see internet" is unclear to Applicant. Given the foregoing, it is respectfully submitted that the presently claimed invention, and in particular, the elements recited in claim 8, are not described in this publication, therefore the rejection was improper.

As for the rejections of claims 11-15, it was stated that "they disclose limitations already addressed and rejected in the rejection above. However, it is respectfully noted that Applicant does not see where Stefanescu teaches any of the elements recited in claims 11-15. For example, no mention has been made of how Stefanescu teaches "an electronic clinical reference and education system." No mention has been made of how it teaches "a content management process, designed and configured to integrate authors, tools, content submission, quality assurance, content approval and content staging." No mention has been made of how it teaches "a system management process, designed and configured to provide system usage tracking and analysis, branding and licensing management, and systems administration." No mention has been made of how it teaches "a product deployment process, designed and configured to provide a suite of institutional reference and education materials including a diagnostic reference system, an expert imaging center system, and a continuing medical education system." No mention has been made of how it teaches "a content database that contains and organizes information relating to, and originating from, the content management process, system management process, and product deployment process." Likewise, it is unclear to Applicant how claims 12-15 have been rejected in light of Stefanescu.

Given that it has not been demonstrated that the invention claimed in claims 11-15 is "described in" the Stefanescu application, as is required under 35 U.S.C. 102(e), it is respectfully submitted that this rejection is improper and should be withdrawn.

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Conclusion

It is believed that all issues raised by the Examiner have been addressed in the present response. In light of the foregoing, it is respectfully requested that the rejections of claims 1-15 be withdrawn and a Notice of Allowance be issued. If the Examiner wishes to discuss any of the issues raised in this response, Applicant him to contact the undersigned by telephone.